

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000041007

Entity Name: NEW DESTINY INCORPORATED

FILED
Oct 23, 2008
Secretary of State

Current Principal Place of Business:

3211 NE 7TH AVE
B
POMPANO BEACH, FL 33064 US

Current Mailing Address:

P. O. BOX 190339
LAUDERHILL, FL 33319 US

New Principal Place of Business:

4500 N.STATE RD 7
SUITE 203-14
LAUDERDALE LAKES, FL 33319 US

New Mailing Address:

PO BOX 190339
LAUDERHILL, FL 33319 US

FEI Number: 20-3169907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILES, BRENDER B
3211 NE 7TH AVE
B
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

GILES, BRENDER B
480 NW 20TH STREET
APT 102
BOCA RATON,, FL 33431 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BRENDER GILES

10/23/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GILES, BRENDER B
Address: 3211 NE 7TH AVE B
City-St-Zip: POMPAN0 BEACH, FL 33064 US

Title: VP () Delete
Name: WALLOCK, LESLIE P
Address: 7320 NW 46TH STREET
City-St-Zip: LAUDERHILL, FL 33319 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GILES, BRENDER B
Address: 480 NW 20TH STREET APT 102
City-St-Zip: BOCA RATON, FL 33431 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE WALLOCK

VP

10/23/2008

Electronic Signature of Signing Officer or Director

Date